Form PTO-1083

Patent

Case Docket No. H-1026

OR

OR

RECEIVED CENTRAL FAX CENTER

In RE application of

T. MURAKAMI et al

Group Art Unit: 2154

JUL 1 0 2007

Serial No.:

10/073,972

BASED ON NETWORK

METHOD FOR INFORMATION RETRIEVAL

Examiner: J. Joo

Commissioner for Patents P.O. Box 1450

Alexandria, VA 22313-1450

Sir:

For:

Transmitted herewith is an Amendment in the above-identified application.

Small entity of this application under 37 CFR 1.9 and 1.27 has been established by a verified statement previously submitted.

A verified statement to establish small entity status under 37 CFR 1.9 and 1.27 is enclosed.

No additional fee is required.

The fee has been calculated as shown below:

|        | (Col. 1)                                  |             | (Col. 2)                              | (Col. 3)         |
|--------|---|-------------|---------------------------------------|------------------|
|        | Claims<br>Remaining<br>After<br>Amendment |             | Highest No.<br>Previously<br>Paid For | Present<br>Extra |
| Total  |   | Minus       | **                                    | =                |
| Indep. |   | Minus       | ***                                   | =                |
| First  | presentation of                           | Multiple De | pendent Claims                        |                  |

|     | SMALI   | ENTITY     |
|-----|---------|------------|
|     | Rate    | Additional |
|     |         | Fee        |
|     |         |            |
| 1   | X 25    | \$         |
| - 1 |         | _          |
|     | X 100   | \$         |
| 1   | X 180   | \$         |
| 1   | <b></b> | _          |
| ١   | Total   | \$         |

|       | R THAN A<br>ENTITY |
|-------|--------------------|
| Rate  | Additional<br>Fee  |
| X 50  | \$                 |
| X 200 | \$                 |
| X 360 | \$                 |
| Total | \$                 |

If the entry in Col. 1 is less than the entry in Col. 2, write "0" in col. 3.

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The 'Highest Number Previously Paid For' (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior Amendment or the number of claims originally filed.

|             | Please charge my Deposit Account No. 50-1417 in the amount of \$  |
|-------------|---|
| $\boxtimes$ | A Credit Card Payment Form in the amount of \$ 790.00 is attached for RCE fee.  |
|             | The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayments to Deposit Account No. 50-1417. |

冈 Any filing fees under 37 CFR 1.16 for the presentation of extra claims.

冈 Any patent application processing fees under 37 CFR 1.17.

 $\boxtimes$ Any Extension of Time fees that are necessary, which are hereby requested if necessary.

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Date: July 10, 2007

John R. Matting(y, Reg. Ŋó. Attorney for Applicant(s)

## RECEIVED CENTRAL FAX CENTER

JUL 1 0 2007

H-1026

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appl. No.:

10/073,972

Confirmation No. 4933

Applicant:

T. MURAKAMI et al.

Filed:

February 14, 2002

Title:

METHOD FOR INFORMATION RETRIEVAL BASED ON NETWORK

TC/AU:

2154

Examiner:

J. Joo

Customer No.:

24956

## **AMENDMENT**

**MAIL STOP: AF** 

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

In response to the Final Office Action mailed April 10, 2007, please amend the above-identified application as follows:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks/Arguments begin on page 11 of this paper.

A Request for Continued Examination (RCE) and the appropriate fee accompany this Response.